

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Ves No

(CFA-4)
Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization)	name			
Carter for Council				
2. Acronym or Abbreviated Name (if any)	3. Con	mittee Telep	phone Number	
	(			
4. Mailing Address (address where all campaign finance correspondence is received)   13312 Sedgwick Lane	heck If th	is is a new a	ddress	
5. City, State, ZIP Code Carmel, IN 46074		y Affiliatlon <i>(</i> Iblican	(if applicable)	
CANDIDATE INFORMATION (For Candidate's C	ommitt	ees Only)		
7. Full Name of Candidate (include any nickname)	STATE OF THE PARTY		or If Independe	nt Candidate
Carter for Council	Repu	ıblican		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Co	unty of Resi	dence	
City Council At-Large	Ham	ilton		
TYPE OF REPORT			CONVENTIO	ON CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary Pre-Election Annual Nomination Other			Pre-Con	vention
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement o	i Organizatio	n)	Post-Cor	nvention
12. Reporting Period:			UMN A	COLUMNIB
From: 1/1/12 Through: 12/31/12		Ilhis	Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.			7,345.67	
14. Cash on hand and investments January 1, current year.				7,345.6
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (use Schedule A)		-	4 20	1,3
15b. Unitemized	OTAL	<u> </u>	1.36	1,3
	TOTAL		7,347.03	7,347.0
EXPENDITURES		1		
(Note: These amounts include in-kind expenditures and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)			1,559.00	1,559.0
17b. Unitemized			1,009.00	1,008.0
	TOTAL		1,559.00	1,559.0
18. Cash on hand and investments at close of this reporting period (subtrect 17c from 16 in both columns)	TOTAL		5,788.03	5,788.0
19. Debts OWED BY the committee (use Schedule D)		<u> </u>	12,341.02	
20. Debts OWED TO the committee (use Schedule E)			12,041.02	
20. Debis Ovved To the Committee (ase Schedule L)			P. Papalina J. V. Sanda D. Walder	
TIFICATION				FOR OFFICE USE ONLY
T OF MY KNOWLEDGE AND BELIEF IT IS T			OMPLETE. SU	UADD / Human
THIE				WILLOW COUNTY COUNTY OLEMAN  SERVICE OLEMAN  O
i i wai w		Date /		STIMBYMAAT
		4/10/1	5	
for sale or used for any commercial purpose. erson who fails to file a complete or accura- campaign rinance Law commits a class a misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties, (IC 3-	(IC 3-9-4-4 ate report 8	A person whas required by	o knowingly the Indiana;	11.77 / 1 May n
Campagn rinance Law commis a Class o inscienceanos, (IC 3-14-1-14) and may be subject to civil penalities, (IC 3-5	-4-10, IU J	-3-4-11, 10 3-9	7-10)	— • • G@‡5



State Form 4608 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER				
Page2_	of	_10		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	ÇOLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1,	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	☐ Misc. (specify)		1	
Contributor's Occupation (if required)				
2.	Contributions:			
	☐ Direct			
	in-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
Contributor's Occupation (# required)				
3.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			· · · · · · · · · · · · · · · · · · ·
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (# required)				
4.	Contributions:			
	☐ Direct ☐ In-Kind (describe)			
	C mirrord (describe)			
	Other Receipts:			
	☐ Interest ☐ Loan			
	Misc. (specify)		]	
Contributor's Occupation (# required)	·			
5.	Contributions:			
	Direct		1	
	☐ In-Kind (describe)			
	Other Receipts:		1	
	Interest Loan	I	ĺ	
	Misc. (specify)	ľ		
Contributor's Occupation (if required)				
SUBTOTAL	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE	ON THE LAST PAGE ONLY	<b>\$</b> 0		
(Enter total on ITEN	15a of the Summary Sheet)	ΨV		



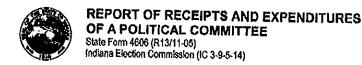
State Form 4608 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
				_
Page _	3	of	10	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number; city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1,	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
3.	Contributions:  Direct In-Kind (describe)			
·	Other Receipts:  interest Loan  Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$0		



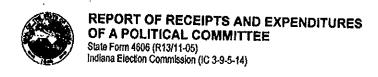
#### (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page _	4	of	10	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions:  Direct In-Kind (describe)  Other Receipts:		TEAN-10-DATE	ALOZIVED. BY
	☐ Interest ☐ Loan ☐ Misc. (specify)	777		
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
5.	Contributions:  Direct  In-Kind (describe)		A desirable and a second	_
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL .	THIS PAGE OF SCHEDULE A	\$	<u>,</u>	
TOTAL OF ALL PAGES OF SCHEDULE ( Enter total on ITEA	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet)	\$0		



# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebales, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER					
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Page_	5	of_	10		-

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)		EAR-TO-DATE	MOGINED BY
	Other Receipts:  Interest Loan  Misc. (specify)	-		
2.	Contributions:  Direct In-Kind (describe)	-		
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
4.	Contributions:  Direct in-Kind (describe)			
	Other Receipts:  interest Loan  Misc. (specify)			
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Miso. (specify)			
Alleran				
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST BACE ONLY	\$		
(Enter total on ITE	M 15a of the Summary Sheet)	\$0		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15g of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, returns, rebates, returns of deposit, proceeds from sakes, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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Page _	6.	of	10	1

CONTRIBUTOR'S FULL FULL MAILING ADE (street, number, city, stat	RESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1,		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
2.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
3,		Contributions:  Direct  In-Kind (describe)			
	[ [	Other Receipts: Interest Loan Misc. (specify)			
4.	] [	Contributions: Direct In-Kind (describe)			
	[	Other Receipts: Interest Loan Misc. (specify)			
5.	<u>ַ</u>	Contributions:  Direct In-Kind (describe)			
	) [	Other Receipts: Interest Loan Misc. (specify)	1		
	SUBTOTAL THE	S PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PA		ON THE LAST PAGE ONLY 5a of the Summary Sheet)	\$0		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

### (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political ection, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER			
Page _	7_ of	10	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN 8 CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
CodeC_ Center For the Performing Arts  1 Center Green Carmel, IN 48032	PerformingArts Center	Direct In-Kind Payment of Deet Returned Contribution Other Purpose:	150.00		2/22/12
Code C. Dixie Packard	Political Candidate	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	100.00		2/28/12
Code _o_ Ronald Carter  12715 Stanwich  Carmel, IN 46033	Consultant	Direct In-Kind Payment of Debt Returned Contribution Other loan repayment Purpose: Expense Retuck ups	1309.00		3/1/12
Code		Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			, and a second
TOTAL OF ALL PA	SUBTOTAL THIS PAG GES OF SCHEDULE BON THE (Enter total on ITEM 17a of th	LAST PAGE ONLY	\$1559.00 \$1559.00		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER	
Page8 of10	

	DUDI IO OLIDATIO	<del></del>	Page	8of	10
Enter Text of Public Question	PUBLIC QUESTIC	ON INFORMATION			
Type of Question: Statewide	] Local				
Position: Supported Oppo	<del>-</del> '				:
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN 6 CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:			
	SUBTOTAL THIS PAG		\$		
TOTAL OF ALL PAGE	S OF SCHEDULE C ON THE (Enter total on ITEM 17a of t	LAST PAGE ONLY he Summary Sheet)	\$0		



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### (CFA-4 SCHEDULE D) Debts Owed by This Committee

	FILE	NUMBE	R	
		-	<u> </u>	
	<u> </u>			
Page	1.	of	2	;

\*ISTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this sedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the unmittee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZiP code)	AMOUNT  NATURE OF DEBT	DATE DEBT CUMULATIVE PAID PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD	
Ronald Carter		.11 1	1.120102		
1311 Rick Rd.		41.01	6/28/02	4101	
COLVINED IN 4(0033)		Wan			
Ronald Carter	•	12 1,2			
1311 Rick Rd. Carnel, IN 40033		13.63	7/30/02	54.64	
LENDERS OCCUPATION		luan		ļ	
Konald Carter		100,00			
1311 Ridge Rd. Carnel, IN 46033		luan	32103	154-04	
LE JERS OCCUPATION		wan			
Ronald Carter 1311 Riog Rd.		77.97	3 22 03		
COLMEN, 1 HOU33		loan	1 1/2400	132.4	
Ronald Carter	1	1350,58			
1311 Ride Rd. Carnel 14 46033		1	3 24/03	1583.19	
LENDERS OCCUPATION		loan			
Konald Carter		118.72	-1120		
1311 Ridge Rd. Carnel IN 46033			3 27 03	1701.91	
LENDERS OCCUPATION:		Wan			
Konald Carter		569.64		2271.55	
Carnel IN 46033		1000	4/6/03	1000	
S OCCUPATION:		Wan	THE PACE OF SOURCE S.	:2271.55	
SUB TOTAL THIS PAGE OF SCHEDULE D					
		L PAGES OF SCHEDULE ITEM 19 of the Summar	D ON THE LAST PAGE ONLY Sheet)	\$·	



State Form 4606 (R8 / 8-97) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1997

### (CFA-4 SCHEDULE D) Debts Owed by This Committee

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	Page	2	of	2	

In TRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter			_		
		191.81	4/11/03		24.2040
Carnel, 17 LENDERS OCCUPATION: 40033		Loan	4/11/00		2463,34°   
Ronald Carter			<del> </del>	<u> </u>	
1311 Ridge Ad.	·	24.23	4/13/03		1487.59
1311 Ridge Ad- Carnel, M LENDERS OCCUPATION: 40033		Wan	11010		10901.011
Ronald Carter		•		*	
,		3337, 90	31105	VA	5825.49
LENDERS OCCUPATION:		Loan.	3/10/95		-50W.49
		1		1	
LENDERS OCCUPATION:		_			
				- - - -	
LENDERS OCCUPATION:					·
CENDENO GOOGLANION.					
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LENDERS OCCUPATION:					
LENU OCCUPATION:		<u> </u>	<u> </u>	SCHEDULE D	20000
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TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY

(Enter total on ITEM 19 of the Summary Sheet)

State Form 4606 (R9 / 11-69) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

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1	UCTIONS: Please type or print legibly IN BLACK INIK all information on this form. For assistance in completing this
Crawi	the see instructions on the mucros side List all debts and loans, recordless of the amount, OWED BY the
come	ittee during the reporting period. Include all amounts owed for or to lending institutions, <i>individuals</i> ,
cradit	nurchases committee codiff card accounts, etc. List each vendor baid by credit card issued in the
nama	of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes
ioans	of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (f any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Corter 1311 Rick Rd. Council, IN 40032		3985,33 loan	4/28/03	,	9810.82
Ronald Carter		43.92	6:303		 00017m
Ronald Carter	-	loan 200. 97			19854.75
ENDERS OCCUPATION:		Bau.87	5 603	·	10,161.61
Royald Carter		38.19 Wan	413903		10,200.37
RONALD Carter	,	47.32	5/3/03		10,247.62
ENDERS OCCUPATION:		wan			
SNOERS OCCUPATION:					•
ENDERS OCCUPATION:					
SUB TOTAL THIS PAGE OF SCHEDULE D  TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY					4422.13



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

### (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions; individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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Page	of	

CREDITOR'S OR LENDER'S NAME  8. MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE. PAID YEAR-TO-DATE	OUTSTANDIN BALANCE TH
	(street, number, city, state, ZIP code)	NATURE OF DEBT		YEAR-TO-DATE	es PER(OD
Ronald Carter 12715 Stanwich Curnel IN 40033	my Campaign	1749.24			
12715 Stanwich	Stare	1, 11 110 ,	31107	,	1199 <i>6.9</i> 4
CHYMUL IN 40033 LENDER'S OCCUPATION:	my Campaign Stove PO BOX 594 Jeffersonville, IN 47	131 Loan			1199φ. 7φ
LENGSON ACCURATION.					
LENGER'S OCCUPATION:					
			and the second s		
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
			-		
LENDER'S OCCUPATION.					
	* - - -				
LEASTER OCCURATION					
LEIDER'S OCCUPATION.					
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(Enter total on ITEM 19 of the Summary Sheet)



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

#### (CFA-4 SCHEDULE D) **DEBTS OWED BY THIS COMMITTEE**

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit d accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A .der's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER				
Page _	Ц	of	12	

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ponald Carter 12715 Stanwich Carnel, 1N 46033	OSP Printing 102 W. Carnel D Carnel, IN 40032	r.\$286.20	42707		12,283.14
Ronald Carter 12715 Stanwich Carnel, IN 40033	le Peep Carnel, M	32.86 Wan	4/20/07		12,314.02
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

### (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

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	FILE NUMBER
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CREDITOR'S OR LENDER'S NAME	ENDORSER'S OR VENDOR'S	AMOUNT	DATE DEBT		
& MAILING ADDRESS (street, number, city, state, ZIP code)	NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	BALANCE THIS PERIOD
Ronald E. Carter		26 11			
12715 Stanwill Pl.		25.00	3/29/11		12,316.02
Carmel, IN 40033 LENDERS OCCUPATION CONSULTANT		loan			16, 21402
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## (CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all Information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

	FILE	NUMBER	
Page	10	of _10_	

BORROWER'S MAINE 8 MALING ADDRESS of anyl (street. number, city, state, ZIP code) (street. number, city, state, ZIP code)  MATURE OF DEBT  DATE DEST PAID VEAR: TO OATS  PAID VEAR: TO OATS  PARID VEA	<u>· – · • — — — — — — — — — — — — — — — — — —</u>	<del></del>				
	OUTSTANDING BALANCE THIS PERIOD	PAID	DATE DEBT INCURRED		& MAILING ADDRESS (if any)	& MAILING ADDRESS
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